

STUDY GROUP EVALUATION FORM

Note: This form is to be completed by each group member in confidence. The faculty member should also maintain confidentiality.

Group Name: _____

(1) Names	(2) Attending Planning Session	(3) Prepared Materials	(4) Demonstrated Voluntary Cooperation	(5) Fulfilled Responsibility In Class	(6) Overall Evaluation
1.					
2.					
3.					
4.					
5.					
6.					
Your Name:					

1. List the names of each group member and your name as indicated. Be sure to evaluate yourself.
2. On a scale of 0 to 5 (with 0 being the lowest and 5 the highest), indicate to what extent each member of the group attended the scheduled study group sessions.
3. On a scale of 0 to 5 (with 0 being the lowest and 5 the highest), indicate to what extent each study group member prepared assigned materials.
4. On a scale of 0 to 5 (with 0 being the lowest and 5 the highest), indicate to what extent each study group member demonstrated voluntary cooperation,
5. On a scale of 0 to 5 (with 0 being the lowest and 5 the highest), indicate to what extent each study group member participated in class with all responsibilities fulfilled.
6. On a scale of 0 to 5 (with 0 being the lowest and 5 the highest), rate the overall contribution of each group member.

(These forms should be collected by the faculty member and used in student evaluations.)